Case 11-11287-SSM Doc 1 Filed 02/24/11 Entered 02/24/11 15:59:56 Desc Main Document Page 1 of 54 **B1** (Official Form 1) (4/10)

	(if more than one, state all): 766
	Street Address of Debtor (No. and 8901 Misty Hollow Lane Nokesville, Va
	County of Residence or of the Pri Prince William Mailing Address of Debtor (if dif
JE	Location of Principal Assets of B
ange 2.5 L	Type of Debtor (Form of Organization) (Check one box)
210 - PDF-XCh	☐ Individual (includes Joint Debtors See Exhibit D on page 2 of this fo ☐ Corporation (includes LLC and L) ☐ Partnership
1382-301X-032	Other (If debtor is not one of the a check this box and state type of er
Bankruptcy2011 ©1991-2011, New Hope Software, Inc., ver. 4.6.0-756 - 31382-301X-03210 - PDF-XChange 2.5 DE	
ope Softwar	Filing Fe
991-2011, New H	Filing Fee to be paid in instal signed application for the couto pay fee except in installme
kruptcy2011 ©1	Filing Fee waiver requested (a attach signed application for
Bank	Statistical/Administrative Info
	Debtor estimates that funds will be Debtor estimates that, after any ex distribution to unsecured creditors
	Estimated Number of Creditors 1-49 50-99 100-199
	Estimated Assets

United States Bankruptcy Court Eastern District of Virginia Voluntary Petition					
Name of Debtor (if individual, enter Last, First, M			t Debtor (Spouse) (Last, Firs	st, Middle):	
Hoffman, Donald Aaron		<u> </u>			
All Other Names used by the Debtor in the last 8 y (include married, maiden, and trade names): None	years		mes used by the Joint Debtor ied, maiden, and trade names		5
Last four digits of Soc. Sec. or Individual-Taxpaye (if more than one, state all): 7665	er I.D. (ITIN) No./Complete EIN	Last four digits (if more than o		Γaxpayer I.D. (ITI	N) No./Complete EIN
Street Address of Debtor (No. and Street, City, ar 8901 Misty Hollow Lane	nd State)	Street Addres	ss of Joint Debtor (No. and St	treet, City, and Sta	ate
Nokesville, Va	ZIPCODE 20181	<u> </u>			ZIPCODE
County of Residence or of the Principal Place of F Prince William	Business:	County of Res	sidence or of the Principal Pl	lace of Business:	
Mailing Address of Debtor (if different from stree	t address):	Mailing Addr	ress of Joint Debtor (if different	ent from street add	lress):
	ZIPCODE	1			ZIPCODE
Location of Principal Assets of Business Debtor (i	if different from street address a	bove):			ZIPCODE
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code) Filing Fee (Check one box) Filing Fee attached Type of Debtor (Check one box) Health Care Business (Check one box) Health Care Business (Check one box) Health Care Business (Check one box) Individual (includes Joint Debtors) Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Nature of Debts (Check one box) Nature of Debts (Check one box) Debts are primarily consumer debts, defined in 11 U.S.C. Debts are primarily consumer debts, defined in 11 U.S.C. Debts are primarily for a personal, family, or household purpose." Filing Fee (Check one box) Full Filing Fee attached Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable				one box) retition for of a Foreign ding retition for of a Foreign of a Foreign occeding Debts are primarily business debts C. § 101(51D) J.S.C. § 101(51D)	
to pay fee except in installments. Rule 1006(the property of the property of the property of the court's consistence of the court of the	apter 7 individuals only). Must	Check	01/13 and every three years there k all applicable boxes plan is being filed with this cceptances of the plan were sore classes, in accordance wi	petition.	126(b).
Statistical/Administrative Information Debtor estimates that funds will be available for distribution to unsecured creditors.		paid, there will be	e no funds available for		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors	1000- 5,001- 5000 10,000	10,001- 25,000	25,001- 50,001- 50,000 100,000	Over 100,000	
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion	
Stimated Liabilities \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion	

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B1 (Offi Galsic)	11114267-SSM Doc 1 Filed 02/2		5:59:56 Desc Main _{Page}		
Voluntary Pe	etition e completed and filed in every case)	Page 2 of 54 Name of Debtor(s): Donald Aaron Hoffman			
(This page musi of	All Prior Bankruptcy Cases Filed Within Last 8 Years (
Location Where Filed:	NONE	Case Number:	Date Filed:		
Location Where Filed:	N.A.	Case Number:	Date Filed:		
	ankruptcy Case Filed by any Spouse, Partner				
Name of Debtor:	NONE	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
10K and 10Q) with Section 13 or 15(d relief under chapte	is attached and made a part of this petition.	(To be completed i whose debts are pri I, the attorney for the petitioner named in the	the notice required by 11 U.S.C. § 342(b).		
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition:					
		arding the Debtor - Venue			
□	(Check ar Debtor has been domiciled or has had a residence, princi immediately preceding the date of this petition or for a lo	ny applicable box) pal place of business, or principal assets in t onger part of such 180 days than in any other	his District for 180 days District.		
	There is a bankruptcy case concerning debtor's affiliate, a	general partner, or partnership pending in th	is District.		
Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United Sates in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.					
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes)					
	Landlord has a judgment for possession of debtor's resid	•	ng.)		
(Name of landlord that obtained judgment)					
	(Address	of landlord)			
	Debtor claims that under applicable non bankruptcy law, entire monetary default that gave rise to the judgment for				
	Debtor has included in this petition the deposit with the operiod after the filing of the petition.	court of any rent that would become due duri	ing the 30-day		
	Debtor certifies that he/she has served the Landlord with	this certification. (11 U.S.C. § 362(1)).			

Case 11-11287-SSM Doc 1		
B1 (Official Form 1) (4/10)		Page 3 of 54 Page 3
Voluntary Petition		Name of Debtor(s):
(This page must be completed and filed in every ca		Donald Aaron Hoffman
	Signat	
Signature(s) of Debtor(s) (Individual/Jo	oint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provides true and correct. [If petitioner is an individual whose debts are primarily consthast chosen to file under chapter 7] I am aware that I may prochapter 7, 11, 12, or 13 of title 11, United States Code, under available under each such chapter, and choose to proceed under the content of	sumer debts and occeed under erstand the relief	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.
[If no attorney represents me and no bankruptcy petition prepetition] I have obtained and read the notice required by 11 U	eparer signs the	(Check only one box.)
I request relief in accordance with the chapter of title 11, Unit Code, specified in this petition.	ited States	I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.
		Pursuant to 11 U.S.C.§ 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
X /s/ Donald Aaron Hoffman	J	
Signature of Debtor	J	X
		(Signature of Foreign Representative)
X	J	
Signature of Joint Deotor	J	
	J	(Printed Name of Foreign Representative)
Telephone Number (If not represented by attorney)	J	
		(Date)
Date		(Date)
Signature of Attorney*		
X /s/ Christopher James	J	Signature of Non-Attorney Petition Preparer
Signature of Attorney for Debtor(s)		I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer
CHRISTOPHER JAMES 29741	J	as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation,
Printed Name of Attorney for Debtor(s)		and have provided the debtor with a copy of this document and the notices
	J	and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110
Attorney at Law Firm Name		setting a maximum fee for services chargeable by bankruptcy petition
	J	preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as
9119 Church Street Address		required in that section. Official Form 19 is attached.
Manassas, VA 20110	J	
Wallassas, VA 20110		Printed Name and title, if any, of Bankruptcy Petition Preparer
_(703) 330-4514	J	Printed Name and title, it any, or bankrupte, I endon't repair.
Telephone Number		Social Security Number (If the bankruptcy petition preparer is not an individual
		state the Social Security number of the officer, principal, responsible person or
Date *In a case in which § 707(b)(4)(D) applies, this signature also	constitutes a	partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
certification that the attorney has no knowledge after an inquir		
information in the schedules is incorrect.	j	Address
Signature of Debtor (Corporation/Partne	rehin)	
I declare under penalty of perjury that the information provi	ided in this petition	
is true and correct, and that I have been authorized to file thi behalf of the debtor.	is petition on	X
The debtor requests relief in accordance with the chapter of	title 11,	Date
United States Code, specified in this petition.	J	Signature of bankruptcy petition preparer or officer, principal, responsible
X		person, or partner whose Social Security number is provided above.
Signature of Authorized Individual		Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
Printed Name of Authorized Individual		If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	J	A bankruptcy petition preparer's failure to comply with the provisions of title 11
Date	— J	and the Federal Rules of Bankruptcy Procedure may result in fines or

B1 D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT Eastern District of Virginia

In re Donald Aaron Hoffman	Case No.
Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

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□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit
counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Donald Aaron Hoffman	
	DONALD AARON HOFFMAN	
Date:		

B6 Cover (Form 6 Cover) (12/07)

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

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In re	Donald Aaron Hoffman	Case No.	
	Debtor	(If known)	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
			0.00	
	Tota	ıl	0.00	

(Report also on Summary of Schedules.)

Case 11-11287-SSM B6B (Official Form 6B) (12/07) Doc 1 Filed 02/24/11 Entered 02/24/11 15:59:56 Desc Main Page 8 of 54 Document

In re	Donald Aaron Hoffman	Case No.	
	Debtor	(If known)	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. Sec. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		cash on hand	Н	300.00
 Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. 		money in checking account	Н	1,150.00
Security deposits with public utilities, telephone companies, landlords, and others.	X			
Household goods and furnishings, including audio, video, and computer equipment.		household goods/appliances computer-Toshiba laptop	H H	1,500.00 200.00
Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
Wearing apparel.		men's clothes	Н	500.00
7. Furs and jewelry.	X			
Firearms and sports, photographic, and other hobby equipment.		Kahr pm9 pistol	Н	500.00
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			

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In re	Donald Aaron Hoffman	Case No.
	Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Interests in partnerships or joint ventures. Itemize.	X			
Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
 Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each. 	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		Toyota Prius 2008 Toyota Camry	H W	12,000.00 10,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			

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In re	Donald Aaron Hoffman	Case No.	
	Debtor	(If known)	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

				<u> </u>
TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
	1	0 continuation sheets attached Tot	lal	\$ 26,150.00

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In re	Donald Aaron Hoffman		Case No.
	Debtor		(If known)
	SCHEDULE C - PROPER	T	CLAIMED AS EXEMPT
	otor claims the exemptions to which debtor is entitled under: neck one box)		
	11 U.S.C. § 522(b)(2)		Check if debtor claims a homestead exemption that exceeds
▼	11 U.S.C. § 522(b)(3)		\$146,450*.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
household goods/appliances	Va. Code §34-26 (4)	1,500.00	1,500.00
men's clothes	Va. Code §34-26 (4)	500.00	500.00
computer-Toshiba laptop	Va. Code §34-26 (4)	200.00	200.00
Kahr pm9 pistol	Va. Code §34-26 (4)	500.00	500.00
cash on hand	Va. Code §34-26 (4)	300.00	300.00
money in checking account	Va. Code §34-4	750.00	1,150.00

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B6D (Official Form 6D) (12/07)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 2826320001 Apple Federal Credit U 9701 Main St Fairfax, VA 22031			Incurred: 2010 Lien: PMSI in vehicle < 910 days Security: 2008 Toyota Prius 1. Current Account VALUE \$ 12,000.00				16,835.00	16,835.00 This amount based upon existence of Superior Liens
ACCOUNT NO.70403164362400001 Toyota Motor Credit 3975 Fair Ridge Dr Ste 3 Fairfax, VA 22033			Incurred: 2010 Lien: PMSI in vehicle < 910 days Security: Toyota Camry 1. Current Account co-maker VALUE \$ 10,000.00				17,491.00	17,491.00 This amount based upon existence of Superior Liens
ACCOUNT NO.			VALUE\$					
continuation sheets attached	!		(Total o	f thi	total is pa l'otal	ge)	\$ 34,326.00 \$ 34,326.00	\$ 34,326.00 \$ 34,326.00

(Report also on (If applicable, repo Summary of Schedules) also on Statistical

(Use only on last page)

(If applicable, report s) also on Statistical Summary of Certain Liabilities and Related Data.) Case 11-11287-SSM Doc 1 Filed 02/24/11 Entered 02/24/11 15:59:56 Desc Main Document Page 13 of 54

B6E (Official Form 6E) (04/10)

Contributions to employee benefit plans

Daniel Association of the Control	
In re Donald Aaron Hoffman Debtor	, Case No (if known)
SCHEDULE E - CREDITORS HOLDIN	,
	pe of priority, is to be set forth on the sheets provided. Only holders of ne boxes provided on the attached sheets, state the name, mailing any, of all entities holding priority claims against the debtor or the
	the creditor is useful to the trustee and the creditor and may be provided if initials and the name and address of the child's parent or guardian, such as name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).
If any entity other than a spouse in a joint case may be jointly liable entity on the appropriate schedule of creditors, and complete Schedule H-both of them or the marital community may be liable on each claim by pla Joint, or Community." If the claim is contingent, place an "X" in the column the column labeled "Unliquidated." If the claim is disputed, place an "X more than one of these three columns.)	acing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, nn labeled "Contingent." If the claim is unliquidated, place an "X"
Report the total of claims listed on each sheet in the box labeled "Schedule E in the box labeled "Total" on the last sheet of the completed so	Subtotals" on each sheet. Report the total of all claims listed on this chedule. Report this total also on the Summary of Schedules.
	eet in the box labeled "Subtotals" on each sheet. Report the total of all Totals" on the last sheet of the completed schedule. Individual debtors with of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each amounts not entitled to priority listed on this Schedule E in the box labele with primarily consumer debts report this total also on the Statistical Sum Data.	
Check this box if debtor has no creditors holding unsecured priority c	claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below	if claims in that category are listed on the attached sheets)
Domestic Support Obligations	
Claims for domestic support that are owed to or recoverable by a spo or responsible relative of such a child, or a governmental unit to whom such 11 U.S.C. § 507(a)(1).	use, former spouse, or child of the debtor, or the parent, legal guardian, a domestic support claim has been assigned to the extent provided in
Extensions of credit in an involuntary case	
Claims arising in the ordinary course of the debtor's business or finan appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).	icial affairs after the commencement of the case but before the earlier of the
Wages, salaries, and commissions	
Wages, salaries, and commissions, including vacation, severance, a independent sales representatives up to \$11,725* per person earned within cessation of business, whichever occurred first, to the extent provided in 1	

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

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B6E (Official Form 6E) (04/10) - Cont.

In re Donald Aaron Hoffman Debtor	, Case No(if known)
Certain farmers and fishermen	
Claims of certain farmers and fishermen, up to \$5,775* per farme	er or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals	
Claims of individuals up to \$2,600* for deposits for the purchase, that were not delivered or provided. 11 U.S.C. § 507(a)(7).	lease, or rental of property or services for personal, family, or household use,
Taxes and Certain Other Debts Owed to Governmental Un	its
Taxes, customs duties, and penalties owing to federal, state, and	local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depos	itory Institution
	Office of Thrift Supervision, Comptroller of the Currency, or Board of ccessors, to maintain the capital of an insured depository institution. 11
☐ Claims for Death or Personal Injury While Debtor Was Int	toxicated
Claims for death or personal injury resulting from the operation lcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	of a motor vehicle or vessel while the debtor was intoxicated from using
* Amounts are subject to adjustment on 4/01/13, and every three year adjustment.	ars thereafter with respect to cases commenced on or after the date of

 $\underline{0}$ continuation sheets attached

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B6F (Official Form 6F) (12/07)

In re _	Donald Aaron Hoffman	Case No.
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3499915749315803 American Express* c/o Becket and Lee LLP PO Box 3001 Malvern, PA, 19355			Consideration: Credit card debt				Notice Only
ACCOUNT NO. 3499915749315803 Amex Po Box 297871 Fort Lauderdale, FL 33329			Consideration: Credit card debt 1. Current Account				0.00
ACCOUNT NO. 2826320001 Apple Fcu* 4029 Ridgetop Rd Fairfax, VA, 22030							Notice Only
ACCOUNT NO. 4888936238779080 Bank Of America Po Box 1598 Norfolk, VA 23501			Incurred: 2004 Consideration: Credit card debt				12,799.00
	<u> </u>		<u>. </u>	Subt	otal	>	\$ 12,799.00
Total >							\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

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In re _	Donald Aaron Hoffman	,	Case No	
	Debtor			(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Bank Of America*	CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Citi Po Box 6241 Sioux Falls, SD 57117 Consideration: Credit card debt 1. Current Account 4,775.00 Consideration: Credit card debt 1. Current Account Consideration: Credit card debt 1. Current Account Consideration: Credit card debt 1. Current Account O.00 Consideration: Credit card debt 1. Current Account Incurred: 2010 Consideration: Credit card debt Consideration: Credit card debt Consideration: Credit card debt Consideration: Credit card debt Consideration: Credit card debt Consideration: Credit card debt Notice Only Consideration: Credit card debt Notice Only Consideration: Credit card debt Notice Only	ACCOUNT NO. 4888936238779080 Bank Of America* Attn: Bankruptcy NC4-105-03-14 PO Box 26012 Greensboro, NC, 27410			Consideration: Credit card debt				Notice Only
Citi Po Box 6241 Sioux Falls, SD 57117 ACCOUNT NO. 5424181037732935 Citibank Sd, Na* Attn: Centralized Bankruptcy PO Box 20507 Kansas City, MO, 64195 Citibank Sd, Na* ACCOUNT No. 5466160059783066 Citibank Sd, Na* Attn: Centralized Bankruptcy PO Box 20507 Consideration: Credit card debt Consideration: Credit card debt Consideration: Credit card debt Consideration: Credit card debt Notice Only Notice Only Notice Only	ACCOUNT NO. 5424181037732935 Citi Po Box 6241 Sioux Falls, SD 57117			Consideration: Credit card debt				4,775.00
Citibank Sd, Na* Attn: Centralized Bankruptcy PO Box 20507 Kansas City, MO, 64195 ACCOUNT NO. 5466160059783066 Citibank Sd, Na* Attn: Centralized Bankruptcy PO Box 20507 Consideration: Credit card debt Consideration: Credit card debt Notice Only Notice Only	ACCOUNT NO. 5466160059783066 Citi Po Box 6241 Sioux Falls, SD 57117							0.00
Citibank Sd, Na* Attn: Centralized Bankruptcy PO Box 20507 Notice Only	ACCOUNT NO. 5424181037732935 Citibank Sd, Na* Attn: Centralized Bankruptcy PO Box 20507 Kansas City, MO, 64195							Notice Only
	ACCOUNT NO. 5466160059783066 Citibank Sd, Na* Attn: Centralized Bankruptcy PO Box 20507 Kansas City, MO, 64195			Consideration: Credit card debt				Notice Only

B6F (Official Form 6F) (12/07) - Cont.

In re _	Donald Aaron Hoffman	Case No.
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Donald B. Hoffman 8901 Misty Hollow Lane Nokesville, Va 20181			Incurred: 2010 Consideration: rent/ damages				3,589.00
ACCOUNT NO. 4148080105720 Dsnb Macys 9111 Duke Blvd Mason, OH 45040			Consideration: Credit card debt 1. Current Account				0.00
ACCOUNT NO. 524252165120220 First National Bank Credit Card Center* Attention: Bankruptcy Department 14010 First National Bank Parkway Stop Code 8130 Omaha NE. 68154			Incurred: 2006 Consideration: Credit card debt				Notice Only
ACCOUNT NO. 524252165120220 Fnb Omaha Po Box 3412 Omaha, NE 68103			Incurred: 2006 Consideration: Credit card debt				11,590.00
ACCOUNT NO. 6034621812755841 Gemb/cost Plus World M Po Box 981439 El Paso, TX 79998			Consideration: Credit card debt 1. Current Account				0.00
Sheet no. 2 of 4 continuation sheets att	ached			Sub	tota	ıl≻	\$ 15,179.00

Sheet no. 2 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal ➤ \$ 15,179.00

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re _	Donald Aaron Hoffman	Case No.
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 632609103021170 Hsbc/guitr 2700 Sanders Rd Prospect Heights, IL 60070			Consideration: Credit card debt 1. Current Account				0.00
ACCOUNT NO. 225-57-7665 Internal Revenue Service PO Box 21126 Philadelphia, Pa 23219			Incurred: 2007-08 Consideration: income taxes 2007 & 2008				1,900.00
ACCOUNT NO. 4148080105720 Macys/fdsb* Attn: Bankruptcy PO Box 8053 Mason, OH, 45040			Consideration: Credit card debt				Notice Only
ACCOUNT NO. 632609103021170 Nbgl-mcraes* Attn: Bankruptcy PO Box 15524 Wilmington, DE, 19850			Incurred: 2009 Consideration: Credit card debt				Notice Only
ACCOUNT NO. Office of the US Trustee 115 S. Union Street Alexandria, Va 22314							0.00
Sheet no. 3 of 4 continuation sheets att to Schedule of Creditors Holding Unsecured	ached			Sub	tota	l ≻	\$ 1,900.00

to Schedule of Creditors Holding Unsecured Nonpriority Claims

\$ Total ➤

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B6F (Official Form 6F) (12/07) - Cont.

In re _	Donald Aaron Hoffman	Case No.
	Debtor	(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4331680810004763 Prince William County Employee Credit Union 2080 Old Bridge Road # 101 Woodbridge, Va 22192			Incurred: 2009 Consideration: Credit card debt				12,862.00
ACCOUNT NO. Tracy Walters 46804 Trumpet Circle Sterling, Va 20164			Incurred: 2010 Consideration: personal loan				5,000.00
ACCOUNT NO. 327836404 Wfnnb/express 4590 E Broad St Columbus, OH 43213			Consideration: Credit card debt 1. Current Account				0.00
ACCOUNT NO. 327836404 Wfnnb/express* PO Box 182124 Columbus, OH, 43218			Consideration: Credit card debt				Notice Only
ACCOUNT NO.							

Sheet no. 4 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal ➤ \$ 17,862.00 Total ➤ \$ 52,515.00

Case 11-11287-SSM	Doc 1	Filed 02
B6G (Official Form 6G) (12/07)		Docume

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In re	Donald Aaron Hoffman	Case No.	
	Debtor		(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

Case 11-11287-SSM B6H (Official Form 6H) (12/07)

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In re	Donald Aaron Hoffman	Case No	
_	Debtor		(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Julia Hoffman 8132 Landfall Court Gainesville, Va 20155	Toyota Motor Credit Corporation Central Collections PO Box 2730 Mall Stop TC-13 Torrance, CA 90509-2730

Case

(if known)

N.A.

N.A. N.A.

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B6I (Official Form 6I) (12/07)

Donald Aaron Hoffman

Debtor

Debtor's Marital	DEPENDENTS OF DE	BTOR AN	D SPOUSE		
Status: Separated	RELATIONSHIP(S): son, son		AGE(S): 5,	4	
Employment:	nployment: DEBTOR				
Occupation	Deputy Sheriff				
Name of Employer	Prince William County				
How long employed	8 months				
Address of Employer			N.A.		
INCOME: (Estimate of aver	rage or projected monthly income at time case filed)		DEBTOR	SP	OUSE
1. Monthly gross wages, sa	•		\$4,250.00_	\$	N
(Prorate if not paid mo	•				
2. Estimated monthly overt	ime		\$200.00	\$	N
3. SUBTOTAL			\$4,450.00	\$	N.
4. LESS PAYROLL DEDU	CTIONS				
a. Payroll taxes and so	cial security		\$740.17	\$	N.2
b. Insurance	our security		\$ 270.00	\$	N.2
c. Union Dues			\$ <u>23.00</u> \$ 150.00	\$ \$	N N
d. Other (Specify: va	retirement)	\$130.00	ф	1\
5. SUBTOTAL OF PAYRO	OLL DEDUCTIONS		\$1,183.17	\$	N.
6 TOTAL NET MONTHL	Y TAKE HOME PAY		\$ 3,266.83	\$	N
7. Regular income from operation of business or profession or farm (Attach detailed statement)			\$	\$	N.
8. Income from real property			\$0.00	\$	N.,
9. Interest and dividends10. Alimony, maintenance or support payments payable to the debtor for the			\$0.00	\$	N.
			\$0.00	\$	N.
debtor's use or that of de	-		*	¥	
11. Social security or other	government assistance		\$0.00	\$	N.
(Specify)	20070				
12. Pension of retirement if	icome		\$0.00	\$	N.

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

3,266.83

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17.	17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:				
	None				

13. Other monthly income

14. SUBTOTAL OF LINES 7 THROUGH 13

15. AVERAGE MONTHLY INCOME (Add amounts shown on Lines 6 and 14)

16. COMBINED AVERAGE MONTHLY INCOME (Combine column totals

(Specify)

from line 15)

B6J (Of Gas டி 111 4) (2977) SSM Doc 1 Filed 02/24/11 Entered 02/24/11 15:59:56 Desc Main Document Page 23 of 54

Document I	Page 23 of 54
In re Donald Aaron Hoffman	Case No.
Debtor	Case No(if known)
SCHEDULE J - CURRENT EXPENDIT	TURES OF INDIVIDUAL DEBTOR(S)
Complete this schedule by estimating the average or projected magnetic filed. Prorate any payments made biweekly, quarterly, semi-annually, or a calculated on this form may differ from the deductions from income allow	
Check this box if a joint petition is filed and debtor's spouse maintain labeled "Spouse."	ns a separate household. Complete a separate schedule of expenditures
a. Are real estate taxes included? Yes No b. Is property insurance included? Yes No	
2. Utilities: a. Electricity and heating fuel	\$\$
b. Water and sewer	\$
c. Telephone	\$125.00
d. Other <u>cable/ internet/cell</u>	\$\$50.00
B. Home maintenance (repairs and upkeep)	\$25.00
I. Food	\$595.00
5. Clothing	\$50.00
5. Laundry and dry cleaning	\$100.00
7. Medical and dental expenses	\$250.00
3. Transportation (not including car payments)	\$200.00
P. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$50.00
0.Charitable contributions	\$
1.Insurance (not deducted from wages or included in home mortgage payme	
a. Homeowner's or renter's	\$0.00
b. Life	\$0.00
c. Health	\$0.00
d.Auto	\$0.00
e. Other	\$\$
2. Taxes (not deducted from wages or included in home mortgage payments))
Specify) <u>personal property</u>	\$\$
3. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments)	nts to be included in the plan)
a. Auto	\$300.00
b. Other Prius payment	\$\$20.00
c. Other <u>legal</u>	\$ 100.00
4. Alimony, maintenance, and support paid to others	\$1,300.00
5. Payments for support of additional dependents not living at your home	\$0,00
6. Regular expenses from operation of business, profession, or farm (attach	
7. Other	\$\$
8. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on S	
f applicable, on the Statistical Summary of Certain Liabilities and Related D	1,010,000
9. Describe any increase or decrease in expenditures reasonably anticipated	
None	

3,266.83

\$ ____4,645.00_

\$____-1,378.17__

20. STATEMENT OF MONTHLY NET INCOME

c. Monthly net income (a. minus b.)

a. Average monthly income from Line 15 of Schedule I

b. Average monthly expenses from Line 18 above

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Eastern District of Virginia

In re	Donald Aaron Hollman		_	Case No.		
	Γ	Debtor				
				Chapter	7	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 0.00		
B – Personal Property	YES	3	\$ 26,150.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 34,326.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	5		\$ 52,515.00	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 3,266.83
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 4,645.00
TOTAL		17	\$ 26,150.00	\$ 86,841.00	

Offices of Grant 1287 is 6 M sun Dracy (12/67) ed 02/24/11 Entered 02/24/11 15:59:56 Desc Main United States Bankruptcy Court Eastern District of Virginia

In re	Donald Aaron Hoffman	Case No.	
	Debtor		
		Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount	
Domestic Support Obligations (from Schedule E)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Loan Obligations (from Schedule F)	\$	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00
TOTAL	\$	0.00

State the Following:

Average Income (from Schedule I, Line 16)	\$ 3,266.83
Average Expenses (from Schedule J, Line 18)	\$ 4,645.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 4,108.66

State the Following:

State the Following.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 34,326.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 52,515.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 86,841.00

	Donald Aaron Hoffman	
In re		Case No
	Debtor	(If known)

	ONCERNING DEBTOR'S SCHEDULES R PENALTY OF PERJURY BY INDIVIDUAL DEBTOR
I declare under penalty of perjury that I have reare true and correct to the best of my knowledge, information	ad the foregoing summary and schedules, consisting of sheets, and that they tion, and belief.
	/ / D 11 A 11 CC
Date	Signature: /s/ Donald Aaron Hoffman Debtor:
	Detroi.
Date	Signature: Not Applicable
	(Joint Debtor, if any)
	[If joint case, both spouses must sign.]
	N-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
110(h) and 342(b); and, (3) if rules or guidelines have been p	his document and the notices and information required under 11 U.S.C. §§ 110(b), promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeablice of the maximum amount before preparing any document for filing for a debtor or in.
Printed or Typed Name and Title, if any,	Social Security No.
of Bankruptcy Petition Preparer	(Required by 11 U.S.C. § 110.) title (if any), address, and social security number of the officer, principal, responsible person, or partne
who signs this document.	,
Address	
X	
X Signature of Bankruptcy Petition Preparer	Date
Names and Social Security numbers of all other individuals who prepare	d or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:
If more than one person prepared this document, attach additional signe	d sheets conforming to the appropriate Official Form for each person.
18 U.S.C. § 156.	11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110
DECLARATION UNDER PENALTY OF P	ERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP
or an authorized agent of the partnership] of the	esident or other officer or an authorized agent of the corporation or a member [corporation or partnership] named as debtor the foregoing summary and schedules, consisting ofsheets (total breect to the best of my knowledge, information, and belief.
Date	Signature:
	[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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Eastern District of Virginia

In Re	Donald Aaron Hoffman	Case No.	
		(if known)	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT		SOURCE
2011	4500.00	Prince William County Sheriff	
2010	56,345.00	Prince William County Sheriff	
2009	45,000.00	Prince Wlliam County Police	

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

None

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF	AMOUNT	AMOUNT STILL
	PAYMENTS	PAID	OWING
Apple Fcu* 4029 Ridgetop Rd Fairfax, VA, 22030	1/11	320	16,835.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after date of adjustment.

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

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None

 \boxtimes

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and Receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS DATE OF LOSS

	9. Payments related to debt co	unseling or bankruptcy				
None	for consultation concerning de	List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.				
	NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTO	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY			
Attorn 9119 (opher James ey at Law Church Street sas, VA 20110	January 2011	\$ 750 to start petition			
None	of the debtor, transferred either	absolutely or as security within two	ordinary course of the business or financial affairs o years immediately preceding the commencement			
			3 must include transfers by either or both spouses ated and a joint petition is not filed.)			
NA	ME AND ADDRESS OF TRANS RELATIONSHIP TO DEBTO	*	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED			
Toy	ota Motor Credit Corporation	5/10	traded in Truck for Prius dealershi			
Rel	ationship: none					
None		by the debtor within ten years immedevice of which the debtor is a benefit	ediately preceding the commencement of this case ficiary.			
N N	AME OF TRUST OR OTHER D	EVICE DATE(S) TRANSFE				

VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor None If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse. **ADDRESS** NAME USED DATES OF OCCUPANCY 46804 Trumpet Cir. 2009 same Sterling, Va 20164

16. Spouses and Former Spouses

None \boxtimes

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None \bowtie

List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME NAME AND ADDRESS DATE OF **ENVIRONMENTAL** AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None \boxtimes

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE **ENVIRONMENTAL** LAW

None \boxtimes

List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None \boxtimes

If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

ADDRESS

NATURE OF BUSINESS BEGINNING AND

ENDING DATES

Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None \boxtimes

NAME

ADDRESS

[Questions 19 - 25 are not applicable to this case]

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[If completed by an individual or individual and spouse]			
	I declare under penalty of perjury that I have read the thereto and that they are true and correct.	answers contained in	the foregoing statement of financial affairs and any attachments
Date		Signature	/s/ Donald Aaron Hoffman
Date _		of Debtor	DONALD AARON HOFFMAN
	O Paralta for making a false statement. Fire a	continuation sheets	
	Penalty for making a false statement: Fine o	of up to \$500,000 or t	mprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571
compensat rules or gu	are under penalty of perjury that: (1) I am a bankru ion and have provided the debtor with a copy of this do idelines have been promulgated pursuant to 11 U.S.C in the debtor notice of the maximum amount before prep	aptcy petition prepare ocument and the notic C. § 110 setting a max	A BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) or as defined in 11 U.S.C. § 110; (2) I prepared this document for es and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if timum fee for services chargeable by bankruptcy petition preparers, I for filing for a debtor or accepting any fee from the debtor, as required
If the bankr	Typed Name and Title, if any, of Bankruptcy Petition I supply petition preparer is not an individual, state the name, to signs this document.		Social Security No. (Required by 11 U.S.C. § 110(c).) d social security number of the officer, principal, responsible person, or
Address			
X Signatura	of Bankruptcy Petition Preparer		 Date
Signature (ог ванктирку генноп гтерагег		Date
Names and not an indi	·	prepared or assisted in	preparing this document unless the bankruptcy petition preparer is
If more tha	an one person prepared this document, attach additional	l signed sheets conform	ning to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines

or imprisonment or both. 18 U.S.C. §156.

B8 (Official Form 8) (12/08)

UNITED STATES BANKRUPTCY COURT Eastern District of Virginia

	Donald Aaron Hoffman		
In re		 Case No.	
111.10	Debtor	 cuse i vo.	Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1 Creditor's Name: Apple Federal Credit Union Property will be (check one): Surrendered If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain using 11 U.S.C. §522(f)). Property is (check one): Claimed as exempt Describe Property Securing Debt: Toyota Prius Not claimed as exempt Toyota Prius Not claimed as exempt			· ·
Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain	Property No. 1		
☐ Surrendered	Creditor's Name: Apple Federal Credit Union		Describe Property Securing Debt: Toyota Prius
If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain		4 p	
Redeem the property Reaffirm the debt Other. Explain	☐ Surrendered	VI Retained	
Reaffirm the debt Other. Explain	If retaining the property, I intend to (check)	at least one):	
Other. Explain(for example, avoid lien using 11 U.S.C. §522(f)). Property is (check one):	1		
using 11 U.S.C. §522(f)). Property is (check one):			
Property is (check one):	<u> </u>		(for example, avoid lien
	using 11 U.S.C. §522(f)).		
	Property is (check one):		
Not claimed as exempt		.₩.	Not alaimed as avampt
	Claimed as exempt		Not claimed as exempt
Property No. 2 (if necessary)	Property No. 2 (if necessary)		7
Creditor's Name: Toyota Describe Property Securing Debt: 2008 Toyota Camry			Describe Property Securing Debt: 2008 Toyota Camry
Property will be (check one):	Property will be (check one):		
☐ Surrendered	☐ Surrendered	▼ Retained	
If retaining the property, I intend to (check at least one):	If retaining the property, I intend to (check	at least one):	
Redeem the property		,	
Reaffirm the debt	1 1		
Other. Explain(for example, avoid lien	Other. Explain		(for example, avoid lien
using 11 U.S.C. §522(f)).	using 11 U.S.C. §522(f)).		
	Power to the terms		
	Property is (check one):		Not alaimed as arount
☐ Claimed as exempt ☑ Not claimed as exempt	Claimed as exempt		ivoi ciaimed as exempt

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B8 (Official Form 8) (12/08)

Page 2

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)

Property No. 1 NO Leased Property		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
Decree No. 277		
Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
	$\overline{}$	
Property No. 3 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		□ YES □ NO
ocontinuation sheets attached (if a declare under penalty of perjury that Estate securing debt and/or personal p	the above indicates my intention as to	
	/s/ Donald Aaron Ho	offman
Date:	Signature of Debtor	
	Signature of Debtor	
	Signature of Joint Debt	or

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of Virginia

In re	Donald Aaron Hoffman	Case No.	
	Debtor		(If known)

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of [Non-Attorney] Bankruptcy Petition Preparer

Printed name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Securi number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
X Signature of Bankruptcy Petition Preparer or officer, Principal, responsible person, or partner whose Social Security number is provided above.	
Certification	n of the Debtor
	n of the Debtor ad the attached notice, as required by § 342(b) of the Bankruptcy
I, (We), the debtor(s), affirm that I (we) have received and recode Donald Aaron Hoffman	ad the attached notice, as required by $\S 342(b)$ of the Bankruptcy X /s/ Donald Aaron Hoffman
I, (We), the debtor(s), affirm that I (we) have received and recode Donald Aaron Hoffman	ad the attached notice, as required by § 342(b) of the Bankruptcy
I, (We), the debtor(s), affirm that I (we) have received and rea	ad the attached notice, as required by $\S 342(b)$ of the Bankruptcy X /s/ Donald Aaron Hoffman

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

American Express* c/o Becket and Lee LLP PO Box 3001 Malvern, PA, 19355

Amex Po Box 297871 Fort Lauderdale, FL 33329

Apple Fcu*
4029 Ridgetop Rd
Fairfax, VA, 22030

Apple Federal Credit U 9701 Main St Fairfax, VA 22031

Bank Of America Po Box 1598 Norfolk, VA 23501

Bank Of America* Attn: Bankruptcy NC4-105-03-14 PO Box 26012 Greensboro, NC, 27410

Citi Po Box 6241 Sioux Falls, SD 57117

Citi Po Box 6241 Sioux Falls, SD 57117

Citibank Sd, Na*
Attn: Centralized Bankruptcy
PO Box 20507
Kansas City, MO, 64195

Citibank Sd, Na*
Attn: Centralized Bankruptcy
PO Box 20507
Kansas City, MO, 64195

Donald B. Hoffman 8901 Misty Hollow Lane Nokesville, Va 20181

Dsnb Macys 9111 Duke Blvd Mason, OH 45040

First National Bank Credit Card Center*
Attention: Bankruptcy Department
14010 First National Bank Parkway Stop Code 8130
Omaha, NE, 68154

Fnb Omaha Po Box 3412 Omaha, NE 68103

Gemb/cost Plus World M Po Box 981439 El Paso, TX 79998

Hsbc/guitr 2700 Sanders Rd Prospect Heights, IL 60070

Internal Revenue Service PO Box 21126 Philadelphia, Pa 23219

Julia Hoffman 8132 Landfall Court Gainesville, Va 20155

Macys/fdsb* Attn: Bankruptcy PO Box 8053 Mason, OH, 45040

Nbgl-mcraes*
Attn: Bankruptcy
PO Box 15524
Wilmington, DE, 19850

Office of the US Trustee 115 S. Union Street Alexandria, Va 22314

Prince William County Employee Credit Union 2080 Old Bridge Road # 101 Woodbridge, Va 22192

Toyota Motor Credit 3975 Fair Ridge Dr Ste 3 Fairfax, VA 22033

Tracy Walters 46804 Trumpet Circle Sterling, Va 20164

Wfnnb/express 4590 E Broad St Columbus, OH 43213

Wfnnb/express*
PO Box 182124
Columbus, OH, 43218

UNITED STATES BANKRUPTCY COURT

Eastern District of Virginia

In re:

DONALD HOFFMAN

Case No. Chapter

Debtor(s)

DECLARATION OF DIVISIONAL VENUE

The debtor's domicile, residence, principal place of business or principal assets were located for the grater part of the 180 days preceding the filing of the bankruptcy petition in the city or county:

ALEXANDRIA DIVISION:

COUNTY: PRINCE WILLIAM COUNTY S/ Christopher P. James

Signature of Attorney

UNITED STATES BANKRUPTCY COURT

Eastern District of Virginia

In re:

DONALD HOFFMAN

Case No. Chapter

Debtor(s)

DISCLOSURE OF COMPENSATION -- Rule 2016 (b)

- 1. Pursuant to 11 U.S.C. §329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-names debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is \$ 1500.00
- 2. The source of the compensation paid, or to be paid to me was the debtor family.
- 3. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

Date 2/24/11 at law

Signature

/s/ CHRISTOPHER P. JAMES, attorney

B6 Cover (Form 6 Cover) (12/07)

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
In re Donald Aaron Hoffman	☐ The presumption arises.
Debtor(s)	☑ The presumption does not arise.
Case Number:	\square The presumption is temporarily inapplicable.
(If known)	

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by §707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS					
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.					
	Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).					
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.					
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.					
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.					
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard					
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; OR					
	b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on					

	Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION							
Marital/filing status. Check the box that applies and complete the balance of this part of this stata. ☐ Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. ☑ Married, not filing jointly, with declaration of separate households. By checking this box, penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of Complete only Column A ("Debtor's Income") for Lines 3-11. c. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2. Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11. d. ☐ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B (es unde pouse : tcy Co- plete	and I de." both	
	for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.				Column A Debtor's Income		lumn B bouse's acome	
3	Gross	wages, salary, tips, bonuses, overtime, commissions	•	\$ 4,1	08.66	\$	N.A.	
4	and en busine Do no	Income from the operation of a business, profession or farm . Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.						
	a.	Gross receipts	\$ 0.00					
	b.	Ordinary and necessary business expenses	\$ 0.00					
	c.	Business income	Subtract Line b from Line a	\$	0.00	\$	N.A.	
	in the a	nd other real property income. Subtract Line b from appropriate column(s) of Line 5. Do not enter a number of the operating expenses entered on Line b as a content of the operating entered enter	r less than zero. Do not include					
5	a.	Gross receipts	\$ 0.00					
	b.	Ordinary and necessary operating expenses	\$ 0.00					
	c.	Rent and other real property income	Subtract Line b from Line a	\$	0.00	\$	N.A.	
6	Interes	st, dividends and royalties.		\$	0.00	\$	N.A.	
7	Pension	n and retirement income.		\$	0.00	\$	N.A.	
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; If a payment is listged in Column A, do not report that payment in Column B.				0.00	\$	N.A.	
9	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be					¢		
	a bene	efit under the Social Security Act Debtor \$	0.00 Spouse \$ N.A.	\$	0.00	\$	N.A.	

10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. a. \$ 0.00 b. \$ 0.00 Total and enter on Line 10	\$ 0.00	\$ N.A.				
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	\$ 4,108.66	\$ N.A.				
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.						
•	Part III. APPLICATION OF § 707(b)(7) EXCLUSION						
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.						
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
	a. Enter debtor's state of residence: Virginia b. Enter debtor's household size:3						
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. ▼ The amount on Line 13 is less than or equal to the amount on Line 14. Check the "Th arise" box at the top of page 1 of this statement, and complete Part VIII; do not complete F. The amount on Line 13 is more than the amount on Line 14. Complete the remaining	Parts IV, V, VI	or VII.				

Complete Parts IV, V, VI and VII of this statement only if required. (See Line 15).

	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)								
16	Enter the amount from Line 12.	\$	N.A.						
17	Marital adjustment . If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.								
	a. \$								
	b. \$								
	c. \$								
	Total and enter on Line 17.								
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$	N.A.						

						NS FROM INCO			
19A	Natio inforr numb	Subpart A: Deduce on Standards: food, clothing of Standards for Food, Cloth mation is available at <a "total"="" a="" amound="" ankruptcy="" court.)="" feder<="" href="https://www.us.us.us.us.us.us.us.us.us.us.us.us.us.</th><th>ng and other ite
ning and Other It
sdoj.gov/ust/ or fa
at would currentl</th><th>ms. Er
ems for
rom the</th><th>nter in Line 192
the applicable
e clerk of the ballowed as exem</th><th>A the " number="" of="" on="" persons.="" ptions="" th="" the="" total"="" your=""><th>at from IRS (This he applicable</th><th>\$</th><th>N.A</th>	at from IRS (This he applicable	\$	N.A				
19B	of-Po Out-o www perso years that w additi	onal Standards: health care ocket Health Care for persons of Pocket Health Care for persons of Pocket Health Care for persons who are under 65 years of of age or older. (The applicational dependents whom you see f. 65, and enter the result in Lind older, and enter the result in the result in Line 19B.	under 65 years of sons 65 years of lerk of the bankru age, and enter in able number of postexemptions on younger.) Multiplyine c1. Multiply	of age, a age or aptcy co a Line b ersons your fea ly line a	and in Line a2 older. (This in ourt.) Enter in b2 the applicab in each age cat deral income ta a1 by Line b1 to 2 by Line b2 to	the IRS National Stanformation is available Line b1 the applicable number of person tegory is the number ax return, plus the nuto obtain a total amount of obtain a total amount of the stanformatical amount of the stanformation is available to a stanformation in a stanformation is available to a stanformation is a stanformation in the stanformation in the stanformation is a stanformation in the stanformation in the stanformation is a stanformation in the stanformation in the stanformation is a stanformation in the stanformation in the stanformation is a stanformation in the stanformation in the stanformation is a stanformation in the stanformation in the stanformation is a stanformation in the stanformation in the stanformation is a stanformation in the stanformation in t	andards for ble at ble number of s who are 65 in that categor imber of any ount for persons nt for persons	у	
	Pers	sons under 65 years of age		Persons 65 years of age or older					
	a1.	Allowance per person	N.A.	a2.	Allowance p	per person	N.A.		
	b1.	Number of persons	N.A.	b2.	Number of p	persons			
	c1.	Subtotal	N.A.	c2.	Subtotal		N.A.	\$	N.A
20A	Utiliticavailal consis	Standards: housing and utilities Standards; non-mortgage of the at www.usdoj.gov/ust/ or ts of the number that would of the more of any additional dependent	expenses for the a from the clerk of currently be allow	applical f the ba ved as e	ble county and inkruptcy court exemptions on	family size. (This in t.) The applicable fa	nformation is mily size	s \$	N.A
20B	Housi information family tax re Avera	Standards: housing and utilities and Utilities Standards; in mation is available at www.us y size consists of the number eturn, plus the number of any age Monthly Payments for an a and enter the result in Line	nortgage/rent exp sdoj.gov/ust/ or f that would curre additional depen y debts secured b	rom the rotly be dents v	or your county e clerk of the b allowed as exc whom you supp home, as state	and family size (this bankruptcy court) (the emptions on your fector); enter on Line bed in Line 42; subtra-	s e applicable deral income o the total of the		
	a.	IRS Housing and Utilities St	andards; mortgag	ge/renta	al expense	\$	N.A.		
	b.	Average Monthly Payment f home, if any, as stated in Lin		ired by	your	\$ N.A			
	c.	Net mortgage/rental expense	;			Subtract Line b from	m Line a	\$	N.A
	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:								
21	20B o Utilit	loes not accurately compute ties Standards, enter any addit	the allowance to tional amount to					or	

						
	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.					
	Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.					
22A	\square 0 \square 1 \square 2 or more.					
	If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter in Line a below the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation					
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.					
	a. IRS Transportation Standards, Ownership Costs \$ N.A.					
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 N.A.					
	c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.	\$	N.A.			
	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.					
	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.					
24	a. IRS Transportation Standards, Ownership Costs \$ N.A.					
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 N.A.					
	c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.	\$	N.A.			
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.	\$	N.A.			
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.					
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.	\$	N.A.			
	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are					
28	required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.	\$	N.A.			

29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.				
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually				
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend				
Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.					
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32				
	Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32.				
34	Health Insurance, Disability Insurance and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance	\$	N.A.		
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$	N.A.		
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept				
37	Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.				
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$	N.A.		

^{*}Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Add cloth Nati www add	\$	N.A.				
40	Con of ca	\$	N.A.				
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40.						
		Su	ibpart C: Deductions for De	ebt Payment			
	you Payı total filin	own, list the name of creditor, in ment, and check whether the part of all amounts scheduled as co	ns. For each of your debts that is sed dentify the property securing the dryment includes taxes or insurance, ontractually due to each Secured Creed by 60. If necessary, list additionals on Line 42.	ebt, state the Aver The Average Mor editor in the 60 mo al entries on a sepa	age Monthly on the Payment is the conths following the		
42		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?		
	a.			\$	☐ yes ☐ no		
	b.			\$	☐ yes ☐ no		
	c.			\$	☐ yes ☐ no		
				Total: Add Line a, b and c		\$	N.A.
10	resid you in ad amo	dence, a motor vehicle, or other may include in your deduction ddition to the payments listed in ount would include any sums in and total any such amounts in t	property necessary for your support 1/60th of any amount (the "cure and Line 42, in order to maintain possible default that must be paid in order to the following chart. If necessary, list	rt or the support of nount") that you n ession of the prop o avoid repossessi	f your dependents, nust pay the credito erty. The cure on or foreclosure.	r	
43		Name of Creditor	Property Securing the Debt	1/60th of t	he Cure Amount		
	a.			\$			
	b.			\$			
	c.			\$		\$	N.A.
	 						
44	as pr	iority tax, child support and alir	claims. Enter the total amount, divi mony claims, for which you were li gations, such as those set out in I	iable at the time of		\$	NΑ

		ter 13 administrative expenses. If you are eligible to file a case under Chapving chart, multiply the amount in line a by the amount in line b, and enter the ase.							
	a. Projected average monthly Chapter 13 plan payment. \$ N.A.								
45	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy x N.A.								
	c.		Total: Multiply Lines a and b	\$	N.A.				
46	Total	Deductions for Debt Payment. Enter the total of Lines 42 through 45.		\$	N.A.				
		Subpart D: Total Deductions from Inco	ome						
47	Total	of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41,	and 46.	\$	N.A.				
		Part VI. DETERMINATION OF § 707(b)(2) PRI	ESUMPTION	_					
48	Enter	the amount from Line 18 (Current monthly income for § 707(b)(2))		\$	N.A.				
49	Enter	the amount from Line 47 (Total of all deductions allowed under § 707(b)	(2))	\$	N.A.				
		nly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and		\$	N.A.				
	60-mo	by the number 60 and	\$	N.A.					
	Initia	presumption determination. Check the applicable box and proceed as dire	cted.						
52	The amount on Line 51 is less than \$7,075*. Check the box for "The presumption does not arise" at the top of part of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. The amount set forth on Line 51 is more than \$11,725*. Check the "Presumption arises" box at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not comp the remainder of Part VI. The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VI (Lin 53 through 55).								
53	Enter		\$	N.A.					
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result								
55	Secondary presumption determination. Check the applicable box and proceed as directed. The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VIII.								
	Part VII: ADDITIONAL EXPENSE CLAIMS								
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.								
		Expense Description Monthly]				
56		ı.	\$	N.A.]				
		0.	\$	N.A.					
		2.	\$	N.A.]				
		Total: Add Lines a, b and c		N.A.					

^{*}Amounts are subject to adjustment on 4/1/2013, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Part VIII: VERIFICATION							
I declare under penalty of perjury that the information provided in this statement is true and correct. (<i>If this a joint case, both debtors must sign.</i>)							
57	Date:	Signature: _	/s/ Donald Aaron Hoffman (Debtor)				
	Date:	- Signature: –	(Joint Debtor, if any)				

Income Month 1			Income Month 2		
Gross wages, salary, tips	3,970.00	0.00	Gross wages, salary, tips	4,212.00	0
Income from business	0.00	0.00	Income from business	0.00	0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0
Unemployment	0.00	0.00	Unemployment	0.00	0
Other Income	0.00	0.00	Other Income	0.00	C
Income Month 3			Income Month 4		
Gross wages, salary, tips	4,300.00	0.00	Gross wages, salary, tips	4,230.00	C
Income from business	0.00	0.00	Income from business	0.00	(
Rents and real property income	0.00	0.00	Rents and real property income	0.00	(
Interest, dividends	0.00	0.00	Interest, dividends	0.00	(
Pension, retirement	0.00	0.00	Pension, retirement	0.00	(
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	(
Unemployment	0.00	0.00	Unemployment	0.00	(
Other Income	0.00	0.00	Other Income	0.00	(
Income Month 5			Income Month 6		
Gross wages, salary, tips	3,970.00	0.00	Gross wages, salary, tips	3,970.00	C
Income from business	0.00	0.00	Income from business	0.00	C
Rents and real property income	0.00	0.00	Rents and real property income	0.00	C
Interest, dividends	0.00	0.00	Interest, dividends	0.00	C
Pension, retirement	0.00	0.00	Pension, retirement	0.00	C
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	(
Unemployment	0.00	0.00	Unemployment	0.00	C
Other Income	0.00	0.00	Other Income	0.00	C

Additional Items as Designated, if any

Remarks